

## DO/EO BIBLIOGRAPHIC DATA ENTRY

09/889659

SERIAL NUMBER: 09 / 889659 RECEIPT DATE: 07 / 18 / 01  
IA NUMBER: PCT/ FR99 / 03221 IA FILING DATE: 12 / 21 / 99  
FAMILY NAME: ENRICO DELAY WAIVED (Y/N): N  
GIVEN NAME: MARC DEMAND RECEIVED (Y/N): N  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 01 / 22 / 99  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: G-82 COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 2124897073  
FAX

NAME: ROLAND PLOTTEL  
ROCKEFELLER CENTER STATION  
STREET: PO BOX 293

CITY: NEW YORK  
STATE/COUNTRY: NY ZIP: 101850293

EMAIL:

APPLICATION TITLES:

MAINTENANCE OF AN ANTICOLLISION CHANNEL IN AN ELECTRONIC IDENTIFICATIO  
N SYSTEM

TAB TO LAST POSITION,PUSH SEND



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7380

<b>SERIAL NUMBER</b> 09/889,659	<b>FILING DATE</b> 07/18/2001 <b>RULE</b>	<b>CLASS</b> <del>455</del> 340/10.2	<b>GROUP ART UNIT</b> <del>2681</del> 2635	<b>ATTORNEY DOCKET NO.</b> GEM625
<b>APPLICANTS</b> Marc Enrico, Traverse Chevalier, FRANCE; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/FR99/03221 12/21/1999 <i>KH</i> <b>** FOREIGN APPLICATIONS *****</b> FRANCE 99/00721 01/22/1999 <i>KH</i>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 10
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> Roland Plottel Rockefeller Center Sm PO Box 293 New York, NY 10185-0293				
<b>TITLE</b> Maintenance of an anticollision channel in an electronic identification system				
<b>FILING FEE RECEIVED</b> 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	